

Fill in this information to identify your case:

FILED
 UNITED STATES BANKRUPTCY COURT
 NORTHERN DISTRICT OF ILLINOIS

JUN 08 2018

United States Bankruptcy Court for the:

Northern District of Illinois

Case number (if known):

Chapter you are filing under:

- ☐ Chapter 7
☐ Chapter 11
☐ Chapter 12
☒ Chapter 13

JEFFREY P. ALLSTEADT, CLERK
 INTAKE 1

☒ Check if this is an
 amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

About Debtor 1:

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

MARQUITA

First name

MAXINE

Middle name

PALMER

Last name

Suffix (Sr., Jr., II, III)

About Debtor 2 (Spouse Only in a Joint Case):

First name

Middle name

Last name

Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

N/A

First name

Middle name

Last name

First name

Middle name

Last name

First name

Middle name

Last name

First name

Middle name

Last name

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

XXX - XX - 4235

OR

9 XX - XX -

XXX - XX -

OR

9 XX - XX -

Debtor 1

MARQUITA M. PALMER
First Name Middle Name Last Name

Case number (if known)

(IF KNOWN)

About Debtor 1:

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

Include trade names and doing business as names

☒ I have not used any business names or EINs.

Business name

Business name

EIN

EIN

About Debtor 2 (Spouse Only in a Joint Case):

☐ I have not used any business names or EINs.

Business name

Business name

EIN

EIN

5. Where you live

7415
Number Street

SOUTH INDIANA AVE

Chicago Illinois 60619
City State ZIP CodeCOOK
County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

7415 South Indiana Ave
Number Street

P.O. Box

Chicago, Illinois 60619
City State ZIP Code

If Debtor 2 lives at a different address:

Number Street

City State ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number Street

P.O. Box

City State ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.☐ I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Check one:

☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.☐ I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Debtor 1

Document
 MARQUITA M. PALMER
 First Name Middle Name Last Name

Case number (if known)

(IF KNOWN)

Part 2: Tell the Court About Your Bankruptcy Case**7. The chapter of the Bankruptcy Code you are choosing to file under**

Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

- ☐ Chapter 7
☐ Chapter 11
☐ Chapter 12
☒ Chapter 13

8. How you will pay the fee

☐ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.

☒ I need to pay the fee in installments. If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).

☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years?☐ No

☒ Yes. District NORTHERN When 2017 YR. Case number 17B36635
 MM / DD / YYYY
 District NORTHERN When 2014 YR. Case number 14B37229
 MM / DD / YYYY
 District NORTHERN When 2014 YR. Case number 14B13011
 MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?☒ No

☐ Yes. Debtor _____ Relationship to you _____
 District _____ When _____ Case number, if known _____
 MM / DD / YYYY
 Debtor _____ Relationship to you _____
 District _____ When _____ Case number, if known _____
 MM / DD / YYYY

11. Do you rent your residence?☒ No. Go to line 12.

☐ Yes. Has your landlord obtained an eviction judgment against you?

☐ No. Go to line 12.

☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1

MARQUITA M. PALMER
First Name Middle Name Last Name

Case number (if known)

(IF KNOWN)

Part 3: Report About Any Businesses You Own as a Sole Proprietor**12. Are you a sole proprietor of any full- or part-time business?**☒ No. Go to Part 4.☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number Street

City

State

ZIP Code

Check the appropriate box to describe your business:

☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))☒ None of the above**13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?**

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

☒ No. I am not filing under Chapter 11.☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention****14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

☒ No☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number Street

City

State

ZIP Code

Debtor 1

Document
 MARQUITA M. PALMER
 First Name Middle Name Last Name

Case number (if known)

(IF KNOWN)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

- ☒ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ I am not required to receive a briefing about credit counseling because of:

- ☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

- ☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

- ☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ I am not required to receive a briefing about credit counseling because of:

- ☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

- ☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

- ☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1

Document
 MARQUITA M. PALMER
 First Name Middle Name Last Name

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Case number (if known)

(IF KNOWN)

Part 6: Answer These Questions for Reporting Purposes**16. What kind of debts do you have?****16a. Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."☐ No. Go to line 16b.☒ Yes. Go to line 17.**16b. Are your debts primarily business debts?** *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.☒ No. Go to line 16c.☐ Yes. Go to line 17.**16c.** State the type of debts you owe that are not consumer debts or business debts.**17. Are you filing under Chapter 7?**☒ No. I am not filing under Chapter 7. Go to line 18.

Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?

☐ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?☐ No☐ Yes**18. How many creditors do you estimate that you owe?**☒ 1-49☐ 50-99☐ 100-199☐ 200-999☐ 1,000-5,000☐ 5,001-10,000☐ 10,001-25,000☐ 25,001-50,000☐ 50,001-100,000☐ More than 100,000**19. How much do you estimate your assets to be worth?**☒ \$0-\$50,000☐ \$50,001-\$100,000☐ \$100,001-\$500,000☐ \$500,001-\$1 million☐ \$1,000,001-\$10 million☐ \$10,000,001-\$50 million☐ \$50,000,001-\$100 million☐ \$100,000,001-\$500 million☐ \$500,000,001-\$1 billion☐ \$1,000,000,001-\$10 billion☐ \$10,000,000,001-\$50 billion☐ More than \$50 billion**20. How much do you estimate your liabilities to be?**☒ \$0-\$50,000☐ \$50,001-\$100,000☐ \$100,001-\$500,000☐ \$500,001-\$1 million☐ \$1,000,001-\$10 million☐ \$10,000,001-\$50 million☐ \$50,000,001-\$100 million☐ \$100,000,001-\$500 million☐ \$500,000,001-\$1 billion☐ \$1,000,000,001-\$10 billion☐ \$10,000,000,001-\$50 billion☐ More than \$50 billion**Part 7: Sign Below****For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X Marquita M. Palmer

Signature of Debtor 1

Executed on 03/30/2018

MM / DD / YYYY

X

Signature of Debtor 2

Executed on

MM / DD / YYYY

Debtor 1

First Name Middle Name Last Name
MARQUITA M. PALMER

Case number (if known)

(IF KNOWN)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

X (PROSE DEBTOR) - None. Date 03/30/18
 Signature of Attorney for Debtor

MM / DD / YYYY

Printed name

Firm name

Number Street

City

State

ZIP Code

Contact phone

Email address

Bar number

State

Debtor 1

MARQUITA M. PALMER
 First Name Middle Name Last Name

Case number (if known)

(IF KNOWN)

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page.

The law allows you, as an individual, to represent yourself in bankruptcy court, but **you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.**

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. **Bankruptcy fraud is a serious crime; you could be fined and imprisoned.**

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?

- ☐ No
☒ Yes

Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?

- ☐ No
☒ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms?

- ☒ No

☐ Yes. Name of Person _____

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

x Marquita M. Palmer x
 Signature of Debtor 1

Date 03/30/2018
 MM/DD/YYYY

Contact phone [REDACTED]

Cell phone (312) 661-6500 (only)

Email address (None)

Signature of Debtor 2

Date _____
 MM/DD/YYYY

Contact phone _____

Cell phone _____

Email address _____

Debtor 1 MARQUITA M. PALMER
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the Northern District of Illinois

Case number (IF KNOWN)
(If known)

page 1 of 2

Debtor 1

MARQUITA M. PALMER
First Name Middle Name Last Name

Case number (if known)

(IF KNOWN)

Part 4: Answer These Questions for Administrative and Statistical Records**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- ☒ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☐ Yes

7. What kind of debt do you have?

- ☒ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ 1284.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Total claim

From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations (Copy line 6a.)	\$ ZERO
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ ZERO
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ ZERO
9d. Student loans. (Copy line 6f.)	\$ 1.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ ZERO
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ ZERO
9g. Total. Add lines 9a through 9f.	\$ 1.00

Fill in this information to identify your case and this filing:

Debtor 1 MARQUITA M. PALMER
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the Northern District of Illinois

Case number (IF KNOWN)

NO
☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
☒ Yes. Where is the property?

1.1. 7415 SOUTH INDIANA
Street address, if available, or other description

Avenue - Chicago (city)

Chicago, Illinois 60619
City State ZIP Code

COOK
County

What is the property? Check all that apply.

- ☒ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other

Who has an interest in the property? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? \$125,000.00
Current value of the portion you own? \$125,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Residence/Residing
☐ Check if this is community property (see instructions) (None)

If you own or have more than one, list here:

1.2. 7721 SOUTH RHODES
Street address, if available, or other description

Avenue - Chicago (city)

Chicago, Illinois 60619
City State ZIP Code

COOK
County

What is the property? Check all that apply.

- ☒ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other

Who has an interest in the property? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? \$40,000.00
Current value of the portion you own? \$40,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

INHERITANCE
☐ Check if this is community property (see instructions) (None)

1.3.

Street address, if available, or other description

City State ZIP Code

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number: _____

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. _____

\$165,000.00

MAP 03/20/18

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☒ No
☐ Yes

3.1. Make: _____
 Model: _____
 Year: _____
 Approximate mileage: _____
 Other information: _____

Who has an interest in the property? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

☐ Check if this is community property (see instructions)

If you own or have more than one, describe here:

3.2. Make: _____
 Model: _____
 Year: _____
 Approximate mileage: _____
 Other information: _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

☐ Check if this is community property (see instructions)

(UP KNOWN)

3.3. Make: _____

Model: _____

Year: _____

Approximate mileage: _____

Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ _____

Current value of the portion you own? \$ _____

3.4. Make: _____

Model: _____

Year: _____

Approximate mileage: _____

Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ _____

Current value of the portion you own? \$ _____

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No
☐ Yes

4.1. Make: _____

Model: _____

Year: _____

Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ _____

Current value of the portion you own? \$ _____

If you own or have more than one, list here:

4.2. Make: _____

Model: _____

Year: _____

Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ _____

Current value of the portion you own? \$ _____

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.**6. Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No☒ Yes. Describe.....

USED

\$ ~~5,000.00~~ 5,000.00

MP 03/30/18

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☒ No☐ Yes. Describe.....

\$ ZERO

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☒ No☐ Yes. Describe.....

\$ ZERO

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☒ No☐ Yes. Describe.....

\$ ZERO

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☒ No☐ Yes. Describe.....

\$ ZERO

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☒ No☒ Yes. Describe.....

USED

\$ 500.00

MP 03/30/18

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☒ No☐ Yes. Describe.....

\$ ZERO

13. Non-farm animals

Examples: Dogs, cats, birds, horses

☒ No☐ Yes. Describe.....

(NON-BUSINESS SOUNDS)

\$ ZERO

14. Any other personal and household items you did not already list, including any health aids you did not list☒ No☐ Yes. Give specific information.....

\$ ZERO

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$ 5,500.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the
portion you own?Do not deduct secured claims
or exemptions.**16. Cash**

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☒ No☐ Yes

Cash:

\$ ZERO

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☒ No☐ Yes

Institution name:

17.1. Checking account:

\$ ZERO

17.2. Checking account:

\$ ZERO

17.3. Savings account:

\$ ZERO

17.4. Savings account:

\$ ZERO

17.5. Certificates of deposit:

\$ ZERO

17.6. Other financial account:

\$ ZERO

17.7. Other financial account:

\$ ZERO

17.8. Other financial account:

\$ ZERO

17.9. Other financial account:

\$ ZERO

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☒ No☐ Yes

Institution or issuer name:

\$ ZERO

\$ ZERO

\$ ZERO

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture☒ No☐ Yes. Give specific
information about
them.....

Name of entity:

% of ownership:

0% %

\$ ZERO

0% %

\$ ZERO

0% %

\$ ZERO

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

☒ No

☐ Yes. Give specific information about them.....

Issuer name:

\$ ZERO
\$ ZERO
\$ ZERO

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☒ No

☐ Yes. List each

account separately. Type of account: Institution name:

401(k) or similar plan:

Pension plan:

IRA:

Retirement account:

Keogh:

Additional account:

Additional account:

\$ ZERO
\$15,400
\$ ZERO MP
\$ ZERO 03/31/18
\$ ZERO
\$ ZERO
\$ ZERO

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company
Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☐ No

☐ Yes

Institution name or individual:

Electric:

Gas:

Heating oil:

Security deposit on rental unit:

Prepaid rent:

Telephone:

Water:

Rented furniture:

Other:

\$ ZERO
\$ ZERO
\$ ZERO
\$ ZERO
\$ ZERO
\$ ZERO
\$ ZERO
\$ ZERO
\$ ZERO
\$ 310.00 (APPROX.)

INSURANCE ON PROPERTY (INHERITANCE)
HOSPITAL BILLS (DISEASED), etc. (FUNERAL BILLS)
(CONTINUE TO PAY PLAN).

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

☒ No

☐ Yes

Issuer name and description:

\$ ZERO
\$ ZERO
\$ ZERO

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

\$ ZERO
\$ ZERO
\$ ZERO

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

☒ No

☐ Yes. Give specific information about them....

\$ ZERO

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No

☐ Yes. Give specific information about them....

\$ ZERO

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No

☐ Yes. Give specific information about them....

\$ ZERO

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

☐ No

☒ Yes. Give specific information about them, including whether you already filed the returns and the tax years.

OVERPAID FOR DECEASED
2016 YEAR AND WAS FILED
REFUND SOON.

Federal:

\$ ZERO

State:

\$ 500.00

Local:

\$ ZERO

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No

☐ Yes. Give specific information.....

Alimony:

\$ ZERO

Maintenance:

\$ ZERO

Support:

\$ ZERO

Divorce settlement:

\$ ZERO

Property settlement:

\$ ZERO

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No

☐ Yes. Give specific information.....

\$ ZERO

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☐ No☒ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

~~BRIDGE STATE~~
LIFE INSURANCE
COMPANY

Family Estate

\$ 20,000.00

\$
\$

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No☐ Yes. Give specific information.

\$ ZERO

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

☒ No☒ Yes. Describe each claim.

STOLEN CAR - AND TOWED

\$ 3,500.00

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

☒ No☐ Yes. Describe each claim.

\$ ZERO

35. Any financial assets you did not already list

☒ No☐ Yes. Give specific information.

\$ ZERO

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here

\$ 41,718.00 03/30/18

~~41,718.00~~**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

37. Do you own or have any legal or equitable interest in any business-related property?

☒ No. Go to Part 6.☐ Yes. Go to line 38.

Current value of the portion you own?

Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned

☒ No☐ Yes. Describe.

\$ ZERO

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

☒ No☐ Yes. Describe.

\$ ZERO

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

☒ No☐ Yes. Describe.....

\$ ZERO

41. Inventory

☒ No☐ Yes. Describe.....

\$ ZERO

42. Interests in partnerships or joint ventures

☒ No☐ Yes. Describe..... Name of entity:

% of ownership:

\$ ZERO

\$ ZERO

\$ ZERO

43. Customer lists, mailing lists, or other compilations

☒ No☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?☐ No☐ Yes. Describe.....

\$ ZERO

44. Any business-related property you did not already list

☒ No☐ Yes. Give specific information

\$ ZERO

\$ ZERO

\$ ZERO

\$ ZERO

\$ ZERO

\$ ZERO

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here

\$ ZERO

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

☒ No. Go to Part 7.☐ Yes. Go to line 47.**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

☒ No☐ Yes.....

\$ ZERO

48. Crops—either growing or harvested

- ☒ No
☐ Yes. Give specific information.....

\$ ZERO

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

- ☒ No
☐ Yes.....

\$ ZERO

50. Farm and fishing supplies, chemicals, and feed

- ☒ No
☐ Yes.....

\$ ZERO

51. Any farm- and commercial fishing-related property you did not already list

- ☒ No
☐ Yes. Give specific information.....

\$ ZERO

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here

\$ ZERO

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

- ☒ No
☐ Yes. Give specific information.....

\$ ZERO

\$ ZERO

\$ ZERO

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$ ZERO

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2

\$ 165,000.00

56. Part 2: Total vehicles, line 5

\$ ZERO

MP-03/30/18

57. Part 3: Total personal and household items, line 15

\$ 5,500.00

\$ 4,178.00

MP-03/30/18

58. Part 4: Total financial assets, line 36

\$ ~~4,178.00~~

59. Part 5: Total business-related property, line 45

\$ ZERO

60. Part 6: Total farm- and fishing-related property, line 52

\$ ZERO

61. Part 7: Total other property not listed, line 54

+\$ ZERO

MP-03/30-18

62. Total personal property. Add lines 56 through 61.

\$ ~~4,178.00~~

\$ 4,178.00

\$ 47,218.00

MP-03/30/18

Copy personal property total → +\$ ~~4,178.00~~

63. Total of all property on Schedule A/B. (Add line 55 + line 62.)

\$ 212,218.00

\$ ~~212,218.00~~

MP-03/30/18

Fill in this information to identify your case:

Debtor 1 MARQUITA M. PALMER
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the Northern District of ILLINOIS

Case number (IF KNOWN)
(if known)

☒ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own <small>Copy the value from <i>Schedule A/B</i></small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Brief description: <u>Residence</u> Line from <i>Schedule A/B</i> : <u>1</u>	<u>\$125,000.00</u>	<input checked="" type="checkbox"/> \$ <u>150,000.00</u> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>MP</u> <u>03/30/18</u>
Brief description: <u>FOR SALE</u> Line from <i>Schedule A/B</i> : <u>2</u>	<u>\$125,000.00</u>	<input checked="" type="checkbox"/> \$ <u>150,000.00</u> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>MP</u> <u>03/30/18</u>
Brief description: _____ Line from <i>Schedule A/B</i> : <u>Line #1</u>	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☐ No
- ☒ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
- ☐ No
- ☒ Yes

Part 2:

Additional Page

(BLANK PAGE)

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____

Fill in this information to identify your case:

Debtor 1 MARQUITA PALMER
 First Name Middle Name Last Name
 Debtor 2
 (Spouse, if filing) First Name Middle Name Last Name
 United States Bankruptcy Court for the Northern District of ILLINOIS
 Case number (If known) (IF KNOWN)

☒ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your (Non-Priority) PRIORITY Unsecured Claims

(Non-Priority Schedule F/F)

1. Do any creditors have priority unsecured claims against you?

- ☒ No. Go to Part 2.
☐ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
2.1 <u>AARP-United Health</u> Priority Creditor's Name <u>PLANS OF ILLINOIS) PO BOX 31362</u> Number Street <u>SALT LAKE CITY, UTAH</u> <u>35480</u> City State ZIP Code Last 4 digits of account number <u>1543</u> When was the debt incurred? <u>2005 YEAR</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify <u>CONSUMER</u> Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Total claim <u>\$1.00</u> Priority amount <u>\$0</u> Nonpriority amount <u>(Same)</u>	\$1.00	\$0	(Same)

2.2 <u>AMERICAN GENERAL</u> Priority Creditor's Name <u>FINANCIAL 600 N. ROYAL AVENUE</u> Number Street <u>EVANSVILLE, INDIANA 47713</u> <u>PO BOX 3251, EVANSVILLE, IN 47713</u> City State ZIP Code Last 4 digits of account number <u>(None)</u> When was the debt incurred? <u>2005 YEAR</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify <u>CONSUMER</u> Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Total claim <u>\$1.00</u> Priority amount <u>\$0</u> Nonpriority amount <u>(Same)</u>	\$1.00	\$0	(Same)
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Part 1:

Your **PRIORITY Unsecured Claims** - Continuation Page

(Non-Priority Schedule F/F) -

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Total claim	Priority amount	Nonpriority amount
-------------	-----------------	--------------------

3 Associated Recovery Systems Last 4 digits of account number (None) \$ 1.00 \$ 0 (Same)

Priority Creditor's Name

PO Box 499046 Escandido

CA 92046-9046

When was the debt incurred? 2005 YEAR

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☒ Other. Specify CONSUMER

Is the claim subject to offset?

- ☒ No
☐ Yes

4 AVALON DENTAL, 1500 EAST Last 4 digits of account number (None) \$ 1.00 \$ 0 (Same)

Priority Creditor's Name

87th Street, Chicago, IL

60619

When was the debt incurred? 2005 YEAR

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☒ Other. Specify CONSUMER

Is the claim subject to offset?

- ☒ No
☐ Yes

5 Chicago Public Library, 790 Last 4 digits of account number (None) \$ 1.00 \$ 0 (Same)

Priority Creditor's Name

S. King Drive, Chicago, IL

60619/ACCTS CARDS.

When was the debt incurred? 2005 YEAR

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☒ Other. Specify CONSUMER

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 2: List All of Your NONPRIORITY Unsecured Claims

ALL Previous pgs. Continued

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
- ☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.Com ED 3 LINCOLN CTR, BANKRUPTCY
Nonpriority Creditor's NameDed, DAKBROOK, IL 60181/PO Box
Number Street878 22 Chicago, IL 60680.
City State ZIP Code

Last 4 digits of account number 7020

When was the debt incurred? 2005 YR.

Total claim

\$ 1.00

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify CONSUMER

Who incurred the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

County TREASURER/Redemption
Nonpriority Creditor's Name118 N. CLARK ST - 434 RM. / 8 RM. 212
Number StreetChicago, IL 60602-1413
City State ZIP Code

Last 4 digits of account number 20-27-121-005 \$ 1.00

When was the debt incurred? 2005 YR. 0000

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify County TAXES

Who incurred the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

County TREASURER/Redemption
Nonpriority Creditor's Name118 N. CLARK ST - 434 RM. / 8 RM. 212
Number StreetChicago, IL 60602-1413
City State ZIP Code

Last 4 digits of account number 20-27-49-007 \$ 1.00

When was the debt incurred? 2005 YR

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify County TAXES

Who incurred the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

(NON-PRIORITY Continued Pg.)

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

9 CURRENCY Exchange/Western Union, Last 4 digits of account number (None) \$ 1.00

Nonpriority Creditor's Name
345 E. 75th St., 1st floor Chicago, IL
Number Street
60619 (75th Cottage Grove) No Yvonne Arnold
City State ZIP Code
Employee Executive

Who incurred the debt? Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?
☒ No
☐ Yes

When was the debt incurred? 2005 YR.
 As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Consumer

10 DAVID JONES, 6730 S. Oglesby, Chgo, Last 4 digits of account number (None) \$ 1.00

Nonpriority Creditor's Name
IL 60649 # 7337 South Shore Drive
Number Street
Apt. 1224, Chicago, IL 60649
City State ZIP Code

Who incurred the debt? Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?
☒ No
☐ Yes

When was the debt incurred? 2005 YR.
 As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Consumer

11 Discount Meats & Produce, 533 Last 4 digits of account number (None) \$ 1.00

Nonpriority Creditor's Name
E. 79th Street, Chicago, IL 60620
Number Street
C/O ALI (Store)
City State ZIP Code

Who incurred the debt? Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?
☒ No
☐ Yes

When was the debt incurred? 2005 YR.
 As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Consumer

Part 3: List Others to Be Notified About a Debt That You Already Listed

(Non-Priority Schedule E/F)

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

<div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">12</div>	<p>DOCTOR DONNA BARBEREE PERRY Name CRS Collections Agency, 1550 Old Number Street HENDERSON (HENDERSEN) ROAD, COLUMBUS, City OHIO 43220 State ZIP Code</p>	<p>On which entry in Part 1 or Part 2 did you list the original creditor? (Continued Page) - Creditors Listed. Line _____ of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with (Nonpriority) Unsecured Claims Last 4 digits of account number <u>(None)</u> \$1.00</p>	<p>MP 03/30/18</p>
<div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">13</div>	<p>DUMBAR PLUMBING SVCS, Name Angelo DUMBAR, 6719 South Number Street DOLBY AVENUE, Chicago, IL City 60649 State ZIP Code</p>	<p>On which entry in Part 1 or Part 2 did you list the original creditor? Line _____ of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number <u>(None)</u> \$1.00</p>	<p>MP 03/30/18</p>
<div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">14</div>	<p>Englewood Health Clinic of Name Medicine Insurance Illinois, 1375 Number Street East Schaumburg Road, Schaumburg, City Illinois 60194 State ZIP Code</p>	<p>On which entry in Part 1 or Part 2 did you list the original creditor? Line _____ of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with (Nonpriority) Unsecured Claims Last 4 digits of account number <u>(None)</u> \$1.00</p>	<p>MP 03/30/18</p>
<div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">15</div>	<p>Federal Student Aid (FAFSA) Accts, Name % Loop College Chicago City, 30 East Number Street Lake Street, Chicago, IL 60601 City State ZIP Code</p>	<p>On which entry in Part 1 or Part 2 did you list the original creditor? Line _____ of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number <u>(1437)</u> \$1.00</p>	<p>MP 03/30/18</p>
<div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">16</div>	<p>Guilford Center, Acct. Dept, PO Box Name PO Box 4769, Westlake Village, IL Number Street 91359 City State ZIP Code</p>	<p>On which entry in Part 1 or Part 2 did you list the original creditor? Line _____ of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with (Nonpriority) Unsecured Claims Last 4 digits of account number <u>None</u> \$1.00</p>	<p>MP 03/30/18</p>
<div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">17</div>	<p>HFC Funding - East Settlement Name Corp. HSBC, INC. (USA) FDR/co - PO Box Number Street 3480, Newark, NJ 07193-5480 City State ZIP Code</p>	<p>On which entry in Part 1 or Part 2 did you list the original creditor? Line _____ of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with (Nonpriority) Unsecured Claims Last 4 digits of account number <u>None</u> \$1.00</p>	<p>03/30/18</p>
<div style="border: 1px solid black; padding: 2px; width: 30px; text-align: center;">18</div>	<p>Home Depot, PO Box 469046, Name Escalido, CA 92046 Number Street City State ZIP Code</p>	<p>On which entry in Part 1 or Part 2 did you list the original creditor? Line _____ of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with (Nonpriority) Unsecured Claims Last 4 digits of account number <u>None</u> \$1.00</p>	<p>03/30/18</p>

IN Re: MARQUITA M. PALMER,
DEBTOR

CASE NO. ~~17-36635~~
CHAPTER 13 (IF KNOWN)
COURT ROOM ~~742~~ (IF KNOWN)
JUDGE ~~Doyle~~ (IF KNOWN)

MP 03/30/18

(NONPRIORITY UNSECURED CLAIMS CONTINUATION PAGES)
(AS FOLLOWS: ~~FOUR PAGE OF~~ (PAGE SIX OF NINE))

MP 03/30/18
CASE NO. ~~17-36635~~
JUDGE.

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03/30/18
4.18 Federal Student Aid
Accounting (CP Loop College
Chicago City) 30 EAST LAKE STREET,
CHICAGO, IL 60601
Debtor 1 only

ACCT. NO.
(437) (Student)
(001031437)
2005 YEAR
Consumer

MP 03/30/18
\$1.00
MP 03/30/18

03/30/18
4.19 Guitar Center, Accounting
Dept, PO Box 4769, West Lake
Village, Illinois 91359
Debtor 1 only

2005 YEAR
Consumer

\$1.00
MP
03/30/18

03/30/18
4.20 MFC Funding - EAST
Settlement Corp. HSBC, INC.
USA 1 For/Co - P.O. Box 35480,
NEWARK, NJ 07193-5480
Debtor 1 only

2005 YEAR
Consumer

\$1.00
MP 03/30/18

03/30/18
4.21 Home Depot, PO Box 469046,
Escalante, CA 92046
Debtor 1 only

ERRORS (CROSS OUTS)
03/30/2018, MP
(DUPLICATED)

2005 YEAR
Consumer

\$1.00
MP 03/30/18
MP 03/30/18

03/30/18
4.22 Marathon Gas Station #1
(CITCO) C/O MIKE (MANAGER) F)
130 EAST 75th Street, Chicago,
IL 60619
Debtor 1 only

Acct. No. (None)
2005 YEAR
Consumer

\$1.00

03/30/18
4.23 Marathon Gas Station #2
(MARATHON) C/O MIKE (MANAGER) F)
7550 S. King Drive Street,
Chicago, IL 60619
Debtor 1 only

Acct. No. (None)
2005 YEAR
Consumer

\$1.00

MP-
ERROR 03/30/18
12/18/2017

Additional page
Amended
Form 106 E/F 03/30/18

Case 18-16485 Doc 1 Filed 06/08/18 Entered 06/08/18 15:21:00 Desc Main Document Page 29 of 53
IN the US Bankruptcy Court
Northern District of Illinois
Eastern Division

MP 03/30/18
ACCT

IN Re: MARQUITA PALMER
Debtor

CASE NO. 17B36635
CHAPTER 13 (IF KNOWN)
Court Room 442 (IF KNOWN)
Judge Doyle (IF KNOWN)

MP 03/30/18
Case No. Ct. Rm. Judge
MP 03/30/18
ALL
ERRORS

(Non priority unsecured claims continuation pages)
As follows: (Page five of seven of nine)

Acct. NO. 4235 \$1.00

2005 YEAR
CONSUMER

Acct. NO. (None) \$1.00

2005 YEAR
CONSUMER

Acct. NO. (None) \$1.00

2005 YEAR
CONSUMER

Acct. NO. (None) \$1.00

2005 YEAR
CONSUMER

Acct. NO. 9099 OR 604525213-000 \$1.00

2005 YEAR
CONSUMER

Acct. NO \$1.00

2005 YEAR
CONSUMER

Page Seven.

MP 03/30/18
ACCT

21 4.24 Medicare CMS,
Premium, PO Box 145482,
Cincinnati, Ohio 45250-5280
AND STATE with Medicare, PO Box 39,
Lawrence, KS 66044 (Billing/Executive
Office).
Debtor 1 only

22 4.25 MEVIN HARTHORN
4711 West Maypole Street,
Chicago, IL 60644.

23 4.26 OLIVE COSEY, 7416 South
Indiana Av, Chicago, IL
60619

24 4.27 PARIS CLEANERS
301 East 75th Street,
Chicago, IL 60619

25 4.28 PEOPLES GAS & PEOPLES ENERGY
BANKRUPTCY, PO BOX 19100, GREENWAY,
WI 54307

26 4.29 PLS LOAN STORE
1215 East 87th Street,
Chicago, IL 60619.

Debtor 1 only

MP 03/30/18

MP 03/30/18
MP 03/30/18
MP 03/30/18

Added page
Form 106E/F
Schedules -
03/30/2018 Filed
by Debtor.

IN The United States Bankruptcy Court
Northern District of Illinois
Eastern Division

In Re: MARQUITA PALMER
Debtor

CASE # (IF KNOWN)
CHAPTER 13
COURTROOM (IF KNOWN)
JUDGE (IF KNOWN)

Non-Priority Unsecured Claims Continuation Pages As follows:
(Page Nine of Nine)

Page Nine of Nine TOTAL PAGES ATTACHED WITH CORRECTIONS NEEDED -
ed MP 03/30/2018 -

36 Zee's Dollar Store
375 EAST 75th Street
Chicago, Illinois 60619
☒ Debtor 1 only.

Acct. # (None)
2005 YEAR
Consumer Account
\$1.00

☒ Debtor 1 only

37 Zone Cycle Store
West 63rd Street
Chicago, Illinois (NO ZIP CODE)
(Note this creditor was only listed previously)

Acct. # (None)
2005 YEAR, Consumer Acct.
\$ ZERO (owed) (only mentioned)
Acct. # (None)
2005 YEAR
Consumer Acct.
\$1.00

TOTAL # OF CLAIMS (Amount is \$36.00) owed including trustee is \$310.00
US Bankruptcy Court SEPARATE Amount PAID INSTALLMENTS

ADDITIONAL PAGES PREPARED BY: DEBTOR PROSE,
MARQUITA PALMER
7415 S. INDIANA AVENUE
CHICAGO, ILLINOIS 60619
NO PHONE, USE MAIL ONLY.

X Marquita M. Palmer (PROSE)
DEBTOR
X 03/30/2018

* NOTE - Trustee's Fee TOTAL is on different page of Questions
this petition (IF KNOWN CASE # 03/30/2018 Filed - see this
petition FOR ADDITIONAL OTHER THAN \$1.00 List Form 106E/F
03/30/2018. So - \$36.00 Schedule E/F to Creditors.

Page Nine (09) - (Page Nine of Nine).

Part 4: Add the Amounts for Each Type of (Unsecured Claim)

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.
Add the amounts for each type of unsecured claim.

Total claim**Total claims
from Part 1**

6a. Domestic support obligations

6a. \$ ZERO

6b. Taxes and certain other debts you owe the government

6b. \$ ZERO

6c. Claims for death or personal injury while you were intoxicated

6c. \$ ZERO6d. Other. Add all other priority (unsecured claims).
Write that amount here.6d. + \$ None (ZERO) schedule E/F Form 106A/F

6e. Total. Add lines 6a through 6d.

6e. \$ ZERO**Total claim****Total claims
from Part 2**

6f. Student loans

6f. \$ 1.00

6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims

6g. \$ ZERO

6h. Debts to pension or profit-sharing plans, and other similar debts

6h. \$ ZERO6i. Other. Add all other nonpriority unsecured claims.
Write that amount here.6i. + \$ ZERO

6j. Total. Add lines 6f through 6i.

6j. \$ 1.00

Fill in this information to identify your case:

Debtor 1 MARQUITA M. PALMER
First Name Middle Name Last Name
Debtor 2
(Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the Northern District of ILLINOIS
Case number (IF KNOWN)
(If known)

Check if this is:

- NO ☐ An amended filing
NO ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☒ No. Go to line 2.
☐ Yes. Does Debtor 2 live in a separate household?

- ☐ No
☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

- ☒ No
☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

- ☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☒ No
☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

If not included in line 4:

- 4a. Real estate taxes
4b. Property, homeowner's, or renter's insurance
4c. Home maintenance, repair, and upkeep expenses
4d. Homeowner's association or condominium dues

Your expenses

4. \$ ZERO

4a. \$ 100.00

4b. \$ ZERO

4c. \$ ZERO

4d. \$ ZERO

Debtor 1

MARQUITA M. PALMER
 First Name Middle Name Last Name

Case number (if known)

(IF KNOWN)

Your expenses

5. Additional mortgage payments for your residence, such as home equity loans 5. \$ ZERO
6. Utilities:
- 6a. Electricity, heat, natural gas 6a. \$ 150.00
- 6b. Water, sewer, garbage collection 6b. \$ 120.00
- 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 25.00
- 6d. Other. Specify: _____ 6d. \$ ZERO
7. Food and housekeeping supplies 7. \$ ZERO
8. Childcare and children's education costs 8. \$ ZERO
9. Clothing, laundry, and dry cleaning 9. \$ ZERO
10. Personal care products and services 10. \$ ZERO
11. Medical and dental expenses 11. \$ ZERO
12. Transportation. Include gas, maintenance, bus or train fare.
Do not include car payments. 12. \$ ZERO (STAYATA (PARTIAL ride))
13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ ZERO
14. Charitable contributions and religious donations 14. \$ ZERO
15. Insurance.
Do not include insurance deducted from your pay or included in lines 4 or 20.
- 15a. Life insurance 15a. \$ ~~ZERO~~ 20.00
- 15b. Health insurance 15b. \$ ZERO
- 15c. Vehicle insurance 15c. \$ ~~ZERO~~ ZERO
- 15d. Other insurance. Specify: _____ 15d. \$ ~~ZERO~~ ZERO
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.
Specify: _____ 16. \$ ZERO
17. Installment or lease payments:
- 17a. Car payments for Vehicle 1 17a. \$ ZERO
- 17b. Car payments for Vehicle 2 17b. \$ ZERO
- 17c. Other. Specify: _____ 17c. \$ ZERO
- 17d. Other. Specify: _____ 17d. \$ ZERO
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ ZERO
19. Other payments you make to support others who do not live with you.
Specify: _____ 19. \$ ZERO
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.
- 20a. Mortgages on other property 20a. \$ ZERO
- 20b. Real estate taxes 20b. \$ ~~ZERO~~ ZERO
- 20c. Property, homeowner's, or renter's insurance 20c. \$ 224.00
- 20d. Maintenance, repair, and upkeep expenses 20d. \$ ZERO
- 20e. Homeowner's association or condominium dues 20e. \$ ZERO

Debtor 1

First Name Middle Name Last Name
MARQUITA M. PALMER

Case number (if known)

(IF KNOWN)

21. Other. Specify: _____

21. +\$ ZERO

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. 639.00
~~699.00~~

22b. Copy line 22 (monthly expenses for Debtor 2), if any, (from Official Form 106J-2)

22b. \$ ZERO

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$ 639.00

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I

\$ 1,284.00

23b. Copy your (monthly expenses) from line 22c above.

23a. \$ ~~639.00~~

23c. Subtract your monthly expenses from your monthly income.
The result is your monthly net income.

23b. -\$ 639.00

23c. \$ 645.00

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.
☐ Yes.

Explain here:

Fill in this information to identify your case:

Debtor 1 MARQUITA M. PALMER
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the Northern District of ILLINOIS

Case number (IF KNOWN)
(If known)

Check if this is:

☒ NO An amended filing
☒ NO A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 1061

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

☐ Employed
☒ Not employed

Occupation

Employer's name

Employer's address

Number	Street
--------	--------

City	State	ZIP Code
------	-------	----------

How long employed there?

Debtor 2 or non-filing spouse

☐ Employed
☐ Not employed

Number	Street
--------	--------

City _____ State _____ ZIP Code _____

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or non-filing spouse

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ ZERO

\$ ~~_____~~ —Include FICA, State, and Local Taxes & Social Security Tax

3. Estimate and list monthly overtime pay.

3. +\$ ZERO

+ \$ ~~1,000,000.00~~ 0.00

4. Calculate gross income. Add line 2 + line 3.

4. \$ZERO

\$

Debtor 1

MARQUITA M. PALMER
First Name Middle Name Last Name

Page 37 of 53

Case number (if known)

(IF KNOWN)

Copy line 4 here..... → 4.

For Debtor 1

\$ ZERO

For Debtor 2 or
non-filing spouse

\$

5. List all payroll deductions:

5a. Tax, Medicare, and Social Security deductions

5a. \$ ZERO

\$

5b. Mandatory contributions for retirement plans

5b. \$ ZERO

\$

5c. Voluntary contributions for retirement plans

5c. \$ ZERO

\$

5d. Required repayments of retirement fund loans

5d. \$ ZERO

\$

5e. Insurance

5e. \$ ZERO

\$

5f. Domestic support obligations

5f. \$ ZERO

\$

5g. Union dues

5g. \$ ZERO

\$

5h. Other deductions. Specify: _____

5h. + \$ ZERO

+ \$

6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.

6. \$ ZERO

\$

7. Calculate total monthly take-home pay. Subtract line 6 from line 4.

7. \$ ZERO

\$

8. List all other income regularly received:

8a. Net income from rental property and from operating a business, profession, or farm

Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.

8a. \$ ZERO

\$

8b. Interest and dividends

8b. \$ ZERO

\$

8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive

Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.

8c. \$ ZERO

\$

8d. Unemployment compensation

8d. \$ ZERO

\$

8e. Social Security

8e. \$ ZERO

\$

8f. Other government assistance that you regularly receive

Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.

Specify: _____

8f. \$ ZERO

\$

8g. Pension or retirement income

8g. \$ 1,284.00

\$

8h. Other monthly income. Specify: _____

8h. + \$ ZERO

+ \$

9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.

9. \$ 1,284.00

\$

10. Calculate monthly income. Add line 7 + line 9.

Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.

10. \$ 1,284.00

\$

\$ 1,284.00

11. State all other regular contributions to the expenses that you list in Schedule J.

Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.

Specify: _____

11. + \$ ZERO

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.

Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies

12. \$ 1,284.00

Combined
monthly income

13. Do you expect an increase or decrease within the year after you file this form?

☒ No.☐ Yes. Explain: _____

Fill in this information to identify your case:

Debtor 1 MARQUITA M. PALMER
First Name Middle Name Last Name
Debtor 2
(Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the NORTHERN District of ILLINOIS
Case number (IF KNOWN)
(If known)

☒ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

x Marquita M. Palmer
Signature of Debtor 1 (PROSE)

x _____
Signature of Debtor 2

Date 03/30/2018
MM / DD / YYYY

Date _____
MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1 MARQUITA M. PALMER
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the NORTHERN District of ILLINOIS

Case number (IF KNOWN)
(If known)

☒ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- ☐ Married
☒ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☒ No
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
<input type="checkbox"/> Same as Debtor 1		<input type="checkbox"/> Same as Debtor 1	
Number Street	From To	Number Street	From To
City State ZIP Code		City State ZIP Code	
<input type="checkbox"/> Same as Debtor 1		<input type="checkbox"/> Same as Debtor 1	
Number Street	From To	Number Street	From To
City State ZIP Code		City State ZIP Code	

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☒ No
☐ Yes. Make sure you fill out Schedule H: Your Creditors (Official Form 106H).

Part 2: Explain the Sources of Your Income

Debtor 1

First Name MARQUITA Middle Name M. Last Name PALMER

Case number (if known)

(IF KNOWN)

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

☒ No

☐ Yes. Fill in the details.

Debtor 1		Debtor 2	
Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy: <input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ _____	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ _____
For last calendar year: (January 1 to December 31, <u> </u> <small>YYY</small>) <input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ _____	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ _____
For the calendar year before that: (January 1 to December 31, <u> </u> <small>YYY</small>) <input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ _____	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ _____

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

☒ No

☐ Yes. Fill in the details.

Debtor 1		Debtor 2	
Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy: _____ _____ _____	\$ _____ \$ _____ \$ _____	_____ _____ _____	\$ _____ \$ _____ \$ _____
For last calendar year: (January 1 to December 31, <u> </u> <small>YYY</small>) _____ _____ _____	\$ _____ \$ _____ \$ _____	_____ _____ _____	\$ _____ \$ _____ \$ _____
For the calendar year before that: (January 1 to December 31, <u> </u> <small>YYY</small>) _____ _____ _____	\$ _____ \$ _____ \$ _____	_____ _____ _____	\$ _____ \$ _____ \$ _____

Debtor 1

MARQUITA M. PALMER
First Name Middle Name Last Name

Case number (if known)

(IF KNOWN)

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

- ☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

☒ No. Go to line 7.

☒ Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☒ No. Go to line 7.

- ☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Creditor's Name Number Street City State ZIP Code		\$	\$	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other
Creditor's Name Number Street City State ZIP Code		\$	\$	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other
Creditor's Name Number Street City State ZIP Code		\$	\$	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other

Debtor 1

MARQUITA M. PALMER
First Name Middle Name Last Name

Case number (if known) (IF KNOWN)

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

- ☒ No
☐ Yes. List all payments to an insider.

Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	\$ _____	\$ _____	
Insider's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	\$ _____	\$ _____	

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

- ☒ No
☐ Yes. List all payments that benefited an insider.

Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	\$ _____	\$ _____	
Insider's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	\$ _____	\$ _____	

Debtor 1

First Name Middle Name Last Name
MARQUITA M. PALMER

Case number (if known) (IF KNOWN)

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☒ No
☐ Yes. Fill in the details.

Nature of the case	Court or agency	Status of the case
Case title _____ _____ Case number _____	Court Name _____ Number Street _____ City State ZIP Code _____	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case title _____ _____ Case number _____	Court Name _____ Number Street _____ City State ZIP Code _____	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.

- ☒ No. Go to line 11.
☐ Yes. Fill in the information below.

Describe the property	Date	Value of the property
Creditor's Name _____ Number Street _____ City State ZIP Code _____	_____	\$ _____
Explain what happened <input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.		
Creditor's Name _____ Number Street _____ City State ZIP Code _____	_____	\$ _____
Explain what happened <input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.		

Debtor 1

MARQUITA M. PALMER
First Name Middle Name Last Name

Case number (if known) (IF KNOWN)

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No
☐ Yes. Fill in the details.

Creditor's Name	Describe the action the creditor took	Date action was taken	Amount
Number Street			\$
City State ZIP Code	Last 4 digits of account number: XXXX--		

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☒ No
☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No
☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			\$
Number Street			\$
City State ZIP Code			
Person's relationship to you			
Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			\$
Number Street			\$
City State ZIP Code			
Person's relationship to you			

Debtor 1

MARQUITA M. PALMER
First Name Middle Name Last Name

Case number (if known) (IF KNOWN)

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

☒ No

☐ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Charity's Name			\$
			\$
Number Street			
City State ZIP Code			

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

☒ No

☐ Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
			\$

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

☒ No

☐ Yes. Fill in the details.

Person Who Was Paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Number Street			\$
			\$
City State ZIP Code			
Email or website address			
Person Who Made the Payment, if Not You			

Debtor 1

First Name Middle Name Last Name
MARQUITA M. PALMER

Case number (if known)

(IF KNOWN)

Description and value of any property transferred		Date payment or transfer was made	Amount of payment
Person Who Was Paid Number Street City State ZIP Code Email or website address Person Who Made the Payment, if Not You			\$
			\$

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?
Do not include any payment or transfer that you listed on line 16.

- ☒ No
☐ Yes. Fill in the details.

Description and value of any property transferred		Date payment or transfer was made	Amount of payment
Person Who Was Paid Number Street City State ZIP Code			\$
			\$

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?
Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).
Do not include gifts and transfers that you have already listed on this statement.

- ☒ No
☐ Yes. Fill in the details.

Description and value of property transferred		Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you			
Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you			

Debtor 1

First Name Middle Name Last Name
MARQUITA M. PALMER

Case number (if known)

(IF KNOWN)

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called *asset-protection devices*.)

- ☒ No
☐ Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date transfer was made

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☒ No
☐ Yes. Fill in the details.

Name of Financial Institution	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Name of Financial Institution Number Street City State ZIP Code	XXXX- - - -	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other		\$
Name of Financial Institution Number Street City State ZIP Code	XXXX- - - -	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other		\$

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No
☐ Yes. Fill in the details.

Name of Financial Institution	Who else had access to it?	Describe the contents	Do you still have it?
Name of Financial Institution Number Street City State ZIP Code	Name Number Street City State ZIP Code		<input type="checkbox"/> No <input type="checkbox"/> Yes

Debtor 1

First Name Middle Name Last Name
MARQUITA M. PALMER

Case number (if known)

(IF KNOWN)

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

☒ No

☐ Yes. Fill in the details.

Who else has or had access to it?

Describe the contents

Do you still have it?

Name of Storage Facility

Name

Number Street

Number Street

City State ZIP Code

City

State

ZIP Code

☐ No

☐ Yes

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

☒ No

☐ Yes. Fill in the details.

Where is the property?

Describe the property

Value

Owner's Name

Number Street

Number Street

City

State

ZIP Code

City

State

ZIP Code

\$

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

☒ No

☐ Yes. Fill in the details.

Governmental unit

Environmental law, if you know it

Date of notice

Name of site

Governmental unit

Number Street

Number Street

City

State

ZIP Code

City

State

ZIP Code

Debtor 1

MARQUITA M. PALMER
 First Name Middle Name Last Name

Case number (if known)

(IF KNOWN)

25. Have you notified any governmental unit of any release of hazardous material?

☒ No☐ Yes. Fill in the details.

Governmental unit		Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
Number Street	Number Street		
	City State ZIP Code		
City State ZIP Code			

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

☒ No☐ Yes. Fill in the details.

Case title	Court or agency	Nature of the case	Status of the case
	Court Name		<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
	Number Street		
Case number	City State ZIP Code		

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
☐ A partner in a partnership
☐ An officer, director, or managing executive of a corporation
☐ An owner of at least 5% of the voting or equity securities of a corporation

☒ No. None of the above applies. Go to Part 12.☐ Yes. Check all that apply above and fill in the details below for each business.

Business Name	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Number Street		EIN: _____
City State ZIP Code	Name of accountant or bookkeeper	Dates business existed From _____ To _____
Business Name	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Number Street		EIN: _____
City State ZIP Code	Name of accountant or bookkeeper	Dates business existed From _____ To _____

Debtor 1

First Name Middle Name Last Name
MARQUITA M. PALMER

Case number (if known)

(IF KNOWN)

Business Name

Number Street

City

State

ZIP Code

Describe the nature of the business

Name of accountant or bookkeeper

Employer Identification number

Do not include Social Security number or ITIN.

EIN: _____

Dates business existed

From _____

To _____

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

☒ No

☐ Yes. Fill in the details below.

Date issued

Name

MM / DD / YYYY

Number Street

City

State

ZIP Code

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

☒ Marquita M. Palmer
Signature of Debtor 1 (Prose)

☒ _____
Signature of Debtor 2

Date 03/30/2018

Date _____

Did you attach additional pages to Your *Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

☒ No
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☒ No
☐ Yes. Name of person _____

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION

Attachment
06-05-2018

In the Matter of)
) Civil Action No.
Marquita Palmer) 14 C 7991

EXECUTIVE COMMITTEE ORDER

On November 10, 2014, an Executive Committee order was entered, directing that Ms. Marquita Palmer be barred from entering the Dirksen U.S. Courthouse.

On April 30, 2018, Ms. Palmer submitted a letter to the Executive Committee, seeking approval to enter the Courthouse for the purpose of filing documents in the U.S. Bankruptcy Court.

At its meeting on May 3, 2018, the Executive Committee considered the request, therefore

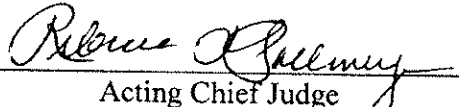
IT IS HEREBY ORDERED That by agreement with the Clerk of the Bankruptcy Court, Ms. Marquita Palmer may mail her documents directly to:

Jeffrey Allsteadt, Clerk
U.S. Bankruptcy Court
219 S. Dearborn, Room 750
Chicago, IL 60604

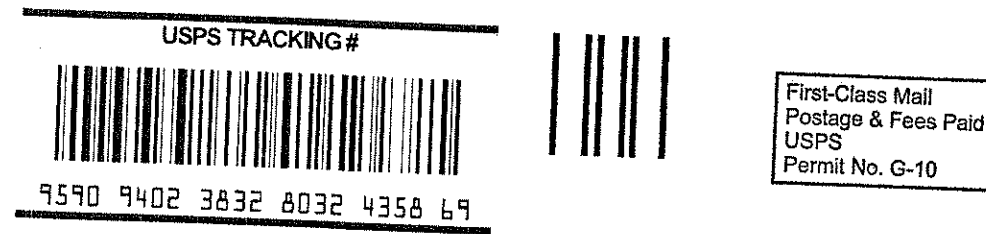
IT IS FURTHER ORDERED That by mailing her documents directly to the Clerk of the Bankruptcy Court only, there is no need for Ms. Palmer to enter the Dirksen U.S. Courthouse.

IT IS FURTHER ORDERED THAT the Clerk shall cause a copy of this order to be mailed to Ms. Marquita Palmer at 7415 S. Indiana Avenue, Chicago, Illinois 60619. Such mailing shall be by certified or registered mail, return receipt requested.

ENTER:
FOR THE EXECUTIVE COMMITTEE


Acting Chief Judge

Dated at Chicago, Illinois this 8th day of May, 2018



United States
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box•

**Clerk, U.S. District Court
219 S. Dearborn St, 20th Floor
Chicago, IL 60604**

1AC 7991 ✓

Attachment
06-05-2018

IN the United States BANKRUPTCY court
Northern District of Illinois
EASTERN Division

IN RE: MARQUITA PALMER,
Debtor

Case # (if known)
Chapter 13
Courtroom (if known)
Judge (if known)

Attachment with Petition 03/30/2018:

Petition By Debtor - Added page #03, PART TWO, #09:
ON previous page 17B36635, 14B37229, AND 14B13011.
Additional previous BANKRUPTcies filed within the
LAST 08 YEARS: 13-B49394, 12B01001, 10-20654,
08B34300, 06B02795, 06B10087, AND 05B24725.

✓ (Official Form 101 CH. 13 Petition Attachment), ==

Prepared By: (Prose)

MARQUITA PALMER

7415 S. INDIANA AVENUE

CHICAGO, ILLINOIS 60619

NO PHONE, USE MAIL ONLY.

X Marquita Palmer (Prose)
X 03/30/2018 Debtor